



HEALTHY RESTAURANTS AND CATERING TRUCKS

HEALTHIER RESTAURANTS AND CATERING TRUCKS ARE EXAMPLES OF FOOD AWAY FROM HOME THAT MAY SERVE AS A MAJOR SOURCE OF FOOD IN SOME COMMUNITIES.^{116,117} STRATEGIES TO IMPROVE FOOD SELECTIONS IN THESE SETTINGS MAY INCLUDE PROMOTIONS AT THE POINT-OF-PURCHASE, INCREASING THE RANGE OF HEALTHY FOOD OFFERINGS, AND PROMOTING THESE BUSINESSES THROUGH MEDIA AND EDUCATIONAL INITIATIVES.

MAKE THE CASE:

Why Is This A Health Equity Issue?

The issues below highlight the need for healthy restaurant and catering truck strategies that advance health equity:

- **Higher Concentration of Full-Service and Fast Food Restaurants in Low- and Middle-Income Communities and Communities of Color:** Low-income and middle-income communities and communities of color have been found to have more full-service and fast food or quick-service establishments compared to high-income communities.¹¹⁸⁻¹²⁰ Eating away from home in food retail venues such as these has been linked to a variety of poor nutritional and health outcomes.¹²¹
- **Time and Economic Pressures May Contribute to Reliance on Prepared Food Sources:** While time and economic pressures apply to most households, households with limited income may have a tighter budget for purchasing food. Members of these households may also have limited time because of working multiple jobs or having long commute times. Long distances to access resources may be even more common in rural areas.^{100,122} These time and economic pressures may contribute to individuals relying on quickly prepared food sources found at restaurants and catering trucks.
- **Targeted Marketing to Youth of Color Influences Food Choices:** African American and Latino youth are often the target of ethnically-specific marketing initiatives by various food companies.¹²³ Targeted marketing may increase the likelihood that youth will prefer and consume food options that may be calorie-dense and nutrient-poor, which may negatively affect their diet, weight, and health.¹²³



Design and Implement with Health Equity in Mind

To maximize health impact and advance health equity, consider these factors and others when designing, implementing, and evaluating healthy restaurant and catering truck strategies:

KEY FACTORS	BARRIERS OR UNINTENDED CONSEQUENCES	OPPORTUNITIES TO MAXIMIZE IMPACT
TRUST & ENGAGEMENT Build relationships with retailers and overcome cultural barriers	Retailers, particularly those in underserved communities, may be overlooked for health-promoting initiatives due to cultural barriers and misperceptions about their willingness to participate.	<ul style="list-style-type: none">Identify residents or partners with cultural and community ties to engage and recruit retailers in health-related initiatives.Build trust by helping retailers with various aspects of their business (e.g., training staff, incorporating healthy foods).
COST Prioritize cost-effective strategies for food preparation and food offerings	Many smaller full-service and quick-service restaurants and catering trucks operate on thin margins of profit and may be reluctant to modify menus for fear of losing customers and revenue.	<ul style="list-style-type: none">Suggest changes to food preparation and selection that are not only healthy, but also cost-effective (e.g., offer whole beans in addition to refried beans, switch from lard and margarine to oils).
PROMOTION Provide cost-free promotion for restaurants with healthy items	Some small local businesses may not have marketing budgets to promote healthy food options.	<ul style="list-style-type: none">Encourage business owners to adopt healthy practices by helping them with promotional efforts (e.g., point-of-purchase signs) and advertising (e.g., radio spots, newspaper ads).
VARIABLE IMPLEMENTATION & ENFORCEMENT Ensure a comprehensive approach to nutrient labeling for non-chain, locally owned restaurants and catering trucks	Nutrient labeling may be burdensome for non-chain restaurants and catering trucks. These establishments may lack standardized recipes and may not have the resources to conduct nutrient analyses. ¹²⁴ Furthermore, some community members may not be responsive to nutrient labeling. ¹²⁵	<ul style="list-style-type: none">Assess whether nutrient labeling is a viable strategy for your community.Find partners to help save on the cost of nutrient analysis.Build customers' awareness and understanding of nutrient labeling and healthy food options (e.g., use symbols to simplify understanding of nutrient content, offer educational sessions).

Build the Team: Partnership for Success

Successful efforts to implement healthy restaurant and catering truck strategies depend on bringing a diverse set of partners to the table early, consistently, and authentically. These partners may include the following:

- Community-based organizations working on food systems, health, and/or agriculture
- Community development, revitalization, and redevelopment agencies and organizations
- Community members (of diverse abilities, ages, cultures, gender, income levels, race/ethnicity, and sexual orientation)
- Faith-based organizations
- Leaders and community champions from multiple sectors
- Local farmers and regional food distributors
- Public health agencies
- Public Works Department
- Regional or local restaurant associations/ethnic restaurants
- Restaurant and catering truck owners and managers
- Zoning and Planning organizations



HEALTH EQUITY IN ACTION

Carryout Project Brings Healthful Foods to Low-Income Neighborhoods

Baltimore, MD

Low-income African Americans in Baltimore have been found to consume a significant portion of their calories from carryout facilities or restaurants.¹²⁷ These findings and others prompted Johns Hopkins researchers to create the Baltimore Healthy Carryout (BHC) project, with the goal of increasing healthy food options. The Baltimore Healthy Carryout intervention was funded by the Diabetes Research and Training Center, University of Maryland and Johns Hopkins University, as well as the Center for a Livable Future at Johns Hopkins University.

Being sensitive to restaurant owners' concerns that significant changes might drive away customers, BHC adopted a phased approach, implementing improvements over time. BHC staff maintained close contact with the owners, visiting each restaurant at least once a week. Through a series of discussions with community members, BHC staff members were able to gauge which healthy foods customers would want. These discussions guided the restaurant

owners toward culturally and seasonally acceptable side options such as collard greens, watermelon, broth-based soup with vegetables, yogurt, and fruit cups. Carryout restaurants eventually began offering healthy combo meals (e.g., a healthy entrée with a healthy side instead of fries, bottled water in place of soda) that matched the price of original combo meals, making them accessible to price-sensitive groups.

BHC also addressed concerns about potential profit loss by helping owners with promotion. Paper menus were replaced by more durable laminated signs. Literacy was considered during menu and poster creation, and images were used on the menus to help customers identify healthy choices. The modified menu boards and posters provided an aesthetic improvement, a co-benefit that business owners appreciated. BHC brought healthful foods to Baltimore residents in a way that supported existing local carryout businesses.





Healthy Hometown Restaurant Initiative

Louisville, KY

Many people generally consume a large portion of their calories outside of the home in Louisville, KY.¹²⁶ In an effort to promote healthy eating, Louisville Metro Public Health and Wellness (LMPHW), with support from CDC's *Communities Putting Prevention to Work* program, implemented the Healthy Hometown Restaurant Initiative to encourage restaurants to provide healthier options for their patrons. A voluntary menu-labeling resolution was implemented that included a nutrition analysis of meals with printed calorie information and recommendations for healthier menu choices.

LMPHW learned that the community's strong social connectedness provided a benefit when trying to get buy-in from restaurant owners. Restaurateurs were most motivated to join if they were approached by individuals they trusted, and if those individuals thought their customers wanted the change.

Initially, LMPHW conducted community surveys through the University of Louisville and local youth, hosted professional cooking demonstrations, and attended business association meetings. These activities helped spread the word about the restaurant initiative to residents and restaurant owners. However, only restaurants located in affluent neighborhoods were responding. To engage restaurant owners in Louisville's low-income neighborhoods, outreach coordinators conducted in-person visits to restaurants. LMPHW overcame owner hesitation by engaging champions including a neighborhood association and the owner of a local restaurant who had previously signed on to the initiative. The champions spread the word about the Healthy Hometown Initiative and encouraged other restaurateurs to join. Their local outreach led five additional restaurants to join the initiative.